

15750 U.S. PTO
120503

Patent
Attorney Docket No. 54427.8002.US02

Express Mail Label EL994147877US

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as Express Mail No. EL994147877US in an envelope addressed to: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on:

Date: 12/5/03

By: [Signature]
Rena lov

22264 U.S. PTO
10/729425

120503

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: APPEL, Gerald D. *et al.*

APPLICATION NO.: Not yet assigned

FILED: December 5, 2003

FOR: **SYSTEM AND METHOD FOR
DETERMINING MUSCLE DYSFUNCTION**

**Transmittal of Continuation Patent Application
for Filing Under 37 CFR §1.53(b)**

Mail Stop Patent Application
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir Transmitted herewith for filing is a patent application by inventor(s): Gerald D. Appel, Harry W. Clark, and Mary Kathleen Day, and entitled:

SYSTEM AND METHOD FOR DETERMINING MUSCLE DYSFUNCTION

1. Enclosed are:

- ☒ One stamped, self-addressed postcard for PTO datestamp.
- ☒ Certificate of Express Mail.
- ☒ One utility patent application containing text pages 1-49.
- ☒ 9 Sheets of formal drawings (Figures 1A through 16).
- ☒ Declaration and Power of Attorney (copy from parent application).
- ☐ Sequence listing printout, diskette, and matching declaration.
- ☐ Sheets of formal drawings.
- ☒ A Preliminary Amendment.
- ☐ A new Power of Attorney.

2. Amendment

- ☐ Please enter the enclosed Preliminary Amendment before calculating the filing fee. It is understood that only amendments reducing the number of claims will be entered for this purpose.
- ☐ Please cancel original claims , inclusive, before calculating the filing fee. (At least one original independent claim should be retained for filing purposes.)

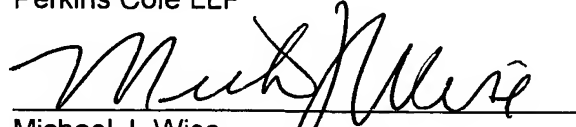
3. Extension of Time
☐ A petition for extension of time has been filed in the parent to extend the pendency of the parent to _____ (copy enclosed).
☒ Conditional Petition for Extension of Time: An Extension of Time is requested to provide for timely filing *if* required to establish copendency with the parent after all papers filed herewith have been considered.
4. U.S. Priority
☒ This application is a continuation of U.S. Application No. 09/901,992 filed on July 10, 2001, which is a continuation of U.S. Application No. 09/488,208 filed on January 19, 2000 and issued as U.S. Patent No. 6,280,395, both of which are hereby incorporated by reference in their entirety including drawings as fully set forth herein.
5. Foreign Priority
☐ Priority of Application No. «SerialNo» filed in _____ on _____ is claimed under 35 USC §119.
☐ A certified copy of this priority document is enclosed.
6. Prior Documents Still In Effect
☐ This application and parent application, Application No. «SerialNo», filed «FileDate» are assigned of record to _____, as recorded in the U.S. Patent and Trademark Office at Reel _____ and Frame _____.
☐ Power of Attorney in the above-identified prior application is to _____, Reg. No. _____, and the other attorneys or agents identified therein.
7. Entity Status
☐ Large entity status applies to this application.
☒ Applicant claims small entity status. See 37 CFR §1.27
8. Fees
The filing fee has been calculated taking into account any amendments in section 2 above:

For:	(Col. 1) No. Filed	(Col. 2) No. Extra	Small Entity			Other Than a Small Entity	
			Rate	Fee		Rate	Fee
Basic Fee				\$375.00	or		\$750.00
Total Claims	- 20		x \$ 9 =	\$	or	x \$ 18 =	\$
Independent Claims	- 3		x \$42 =	\$	or	x \$ 84 =	\$
<input type="checkbox"/> Multiple Dependent Claim Presented			+ \$140 =	\$	or	+ \$280 =	\$
*If the difference in Col. 1 is less than zero, enter "0" in Col. 2.			TOTAL	\$	or	TOTAL	\$

- ☐ A check in the amount of \$ is enclosed to cover the Filing Fee. The Commissioner is hereby authorized to charge any deficiency in fees under 37 CFR 1.16 and 1.17 to Deposit Account No. 50-2586.
- ☐ Please charge the Filing Fee and any other fees necessary for timely filing of this application to Deposit Account No. 50-2586.
- ☒ ***Filing fee to be submitted in response to anticipated receipt of Notice to File Missing Parts. DO NOT CHARGE DEPOSIT ACCOUNT.**

Date: 12/5/03

Respectfully submitted,
Perkins Coie LLP


Michael J. Wise
Registration No. 34,047

Correspondence Address:

Customer No. 34055
Perkins Coie LLP
P.O. Box 1208
Seattle, WA 98111-1208
Phone: (310) 788-9900
Fax: (206) 332-7198